

PATENT APPLICATION FEE DETERMINATION RECORD Effective December 29, 1999	Application or Docket Number
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CLAIMS AS FILED - PART I		
	(Column 1)	(Column 2)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	44 minus 20 = *	24
INDEPENDENT CLAIMS	12 minus 3 = *	9
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY TYPE <input type="checkbox"/>		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
	345.00	OR		690.00
X\$ 9=		OR	X\$18=	432
X39=		OR	X78=	702
+130=		OR	+260=	
TOTAL		OR	TOTAL	1824

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II					
		(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	49	Minus	** 44	= 5
	Independent	13	Minus	*** 12	= 1
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	90
X39=		OR	X78=	84
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	174

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	35	Minus	** 49	= 0
	Independent	4	Minus	*** 13	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	39	Minus	** 49	= 0
	Independent	4	Minus	*** 13	= 0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X39=		OR	X78=	
+130=		OR	+260=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 9/51 3489

Total Fee Calculation

Fee Code	Total # Claims	Number Entered	X	Fee	Fee	Total
Sm./Lg				Sm. Entry	Lg. Entry	
Basic Filing Fee	2013101				<u>690</u>	<u>690</u>
Total Claims >20	2033101	<u>24</u>	<u>24</u>	X	<u>432</u>	<u>432</u>
Independent Claims >1	2023102	<u>12</u>	<u>9</u>	X	<u>702</u>	<u>702</u>
Multi. Dep. Claim Present	2043104					
Surcharge	2053105				<u>130</u>	<u>130</u>
English Translation	119					

TOTAL FEE CALCULATION

1954

Fees due upon filing the application

Total Filing Fees Due = \$ 1954.00

Less Filing Fees Submitted - \$ ✓

BALANCE DUE = \$ 1954.00

J. R. Rite
Office of Initial Patent Examination

Figure 7